

UNITED STATES DISTRICT COURT

DISTRICT OF \_\_\_\_\_

**APPEARANCE**

Case Number:

To the Clerk of this court and all parties of record:

Enter my appearance as counsel in this case for

I certify that I am admitted to practice in this court.

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Date

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Signature

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Print Name

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Bar Number

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Address

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City

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State

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Zip Code

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Phone Number

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Fax Number